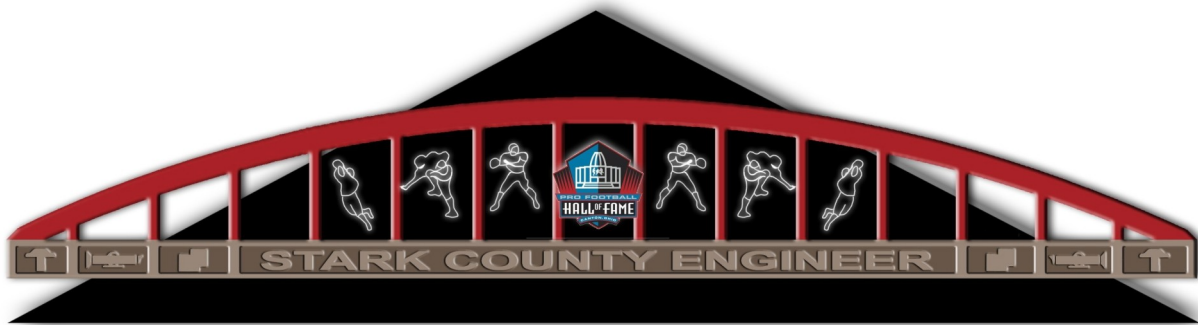


Name: _____
(Last) (First) (Middle)

Date: _____
(Month) (Day) (Year)



Stark County Engineer

Employment Application

Keith A. Bennett, P.E., P.S.
Stark County Engineer
5165 Southway St. SW
Canton, Ohio 44706

PRE EMPLOYMENT INFORMATION FORM
PLEASE ANSWER ALL QUESTIONS - PLEASE PRINT

Qualified applicants are considered for employment, and employees are treated during employment without regard to race, color, religion, sex, national origin, age, disability, or genetic information.

PERSONAL

Name _____ Date _____
(Last) (First) (Middle)

Address _____
(Street) (City/State) (Zip)

Telephone Number _____

Do you have a Commercial Drivers License? Please circle class of CDL: (A) (B) (No CDL)

Position (s) applied for _____

Rate of pay expected \$ _____ per hour.

Any previous government employment? ____ If yes, who and when? _____

Have you ever been convicted of a felony? What? _____ When? _____

If your application is considered favorably, on what date will you be available for work? _____

PERSONAL REFERENCES (not former employers or relatives)

Name	Address	Phone Number	Occupation/ Relationship



RECORD OF EDUCATION

School	Name	Course of Study	Year Completed	Graduate?	List Diploma/Degree
High			1 2 3 4		
College			1 2 3 4		
Other					

LIST BELOW ALL PRESENT AND PAST EMPLOYMENT, BEGINNING WITH YOUR MOST

Name, Address and Phone Number	Contact/Supervisor	Duties	Dates of Employment	Reason for Leaving

Are there any other experiences, licenses or qualifications which you feel would especially fit you for work with the Stark County Engineers Department. _____

MILITARY SERVICE RECORD

Were you in U.S. Armed Forces? Yes _____ No _____ If yes, what Branch? _____

Dates of duty: From _____ To _____

Month Day Year Month Day Year

Rank at discharge _____ Honorable discharge? _____ Other discharge? _____

List duties in the service including special training _____

Have you taken any training under the G.I. Bill of Rights? _____ If yes, what training did you take? _____

**DISCLOSURE UNDER FAIR CREDIT REPORTING ACT
AND CONSENT TO PROCUREMENT OF CONSUMER REPORT
FOR EMPLOYMENT PURPOSES**

The undersigned hereby authorizes the STARK COUNTY ENGINEER'S OFFICE or its insurance agency Sirak Insurance Partners/Travelers Insurance, or its assigns, to obtain copies of consumer reports, including a motor vehicle report, pertaining to me for employment purposes, and for use in rating and/or underwriting insurance for which the above named employer may apply, and any renewal thereof. I understand that in obtaining such consumer reports, a consumer reporting agency may be used, and I do hereby authorize such use.

Drivers' License State and Number: _____

Date of Birth: ____/____/____

Last Four Digits of Your Social Security Number: XXX-XX- _____

Signed: _____

Date: _____

print full name